

RESERVE OFFICER TRAINING CORPS (ROTC)

**DoDMERB GUIDE
FOR
MEDICAL PROCESSING**

FEBRUARY 1999

INTRODUCTION

This guide was developed to provide assistance to Reserve Officer Training Corps (ROTC) detachment personnel in processing, organizing, and submitting medical examinations to the Department of Defense Medical Examination Review Board (DoDMERB). It is strongly suggested that each detachment maintain a copy of this guide and refer to it before contacting DoDMERB. Please forward recommendations for additions, deletions, or clarifications on this guide to DoDMERB (mullenle.dodmerb@usafa.af.mil). All changes and subsequent revisions to this guide will be posted at a designated website or disseminated as determined by each respective ROTC headquarters. We are striving to provide you with as much guidance as possible to assist you and the applicant in navigating through the medical process. This guide does not rescind or supersede any official Army, Navy, or Air Force regulation or directive.

The most important action a detachment can do is to notify DoDMERB (murraysk.dodmerb@usafa.af.mil) of the detachment address of an incoming 4-year or 3-year advanced designee. This will ensure future DoDMERB correspondence is sent to the detachment instead of the applicant's home address.

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GLOSSARY OF TERMS

4-YEAR SCHOLARSHIP DESIGNEE	High school seniors awarded a four-year ROTC scholarship.
AETC/SGPS	Air Education and Training Command, Command Surgeon at Randolph AFB, TX - Air Force Waiver Authority
ADEP	Active Duty Enlisted Program, also referred to as Green to Gold (Army)
3-YEAR ADVANCE DESIGNEE	High school seniors awarded a three-year ROTC scholarship
APPOINTMENT NOTIFICATION CARD	Appointment card sent by the Contractor with the packet to the detachment notifying them of the available exam dates and facilities for 2- or 3-year applicants. The detachment is required to schedule the examination appointment within two (2) days of receipt of the exam packet from the Contractor. Within five (5) days of receipt of the exam packet, the card is then returned by the detachment to the Contractor for verification.
AUTOMATED REVIEW (AR)	Review of the applicant's medical file and search of the system for pending action or requirements. This review takes place each time an action occurs in the applicant's file.
BUMED	Bureau of Medicine and Surgery, Washington, DC (Navy Waiver Authority)
CERTIFICATION	The final <u>verified</u> DoDMERB medical status. Certification is program-specific and is valid for one cycle or one year, whichever occurs first.
CERTIFICATION DATE	The date contracting can occur. The date DoDMERB stamps the physical with the final medical status.
CIVILIAN EXAMINATION CONTRACTOR	Civilian organization contracted by DoDMERB to perform specific services for the completion of initial DoDMERB physical examination. The Contractor sub-contracts the physician, optometry and dental portions of the exam and performs an administrative QA before forwarding to DoDMERB.
CNET	Chief, Naval Education and Training (Navy)
CSP PROGRAM CYCLE	See: In-College Scholarship Program A one-year recruiting year. Each program has beginning and ending cycle periods; dates vary for each program.
CYCLE DATE OF EXAMINATION	A one-year recruiting year. Each program has beginning and ending cycle periods; dates vary for each program.

DATE OF EXAMINATION	Date the physical examination was performed. All DoDMERB exams are valid for <u>two years</u> from the date of the examination.
DISQUALIFIED	Medical status determination indicating the applicant is not medically qualified for commissioning or entry into military service unless a waiver is granted. Disqualifications derive from applicable DoD medical standards.
DoDMERB	Department of Defense Medical Examination Review Board
HQ AROTC	Cadet Command, Fort Monroe, VA (Army Waiver Authority)
IN COLLEGE SCHOLARSHIP PROGRAM (CSP)	Programs managed at the detachment level for scholarship applicants who are located at the college at the time of their application and selection.
MEDICAL STATUS	Indicates an applicant's file status (remedial, disqualified, or qualified).
MEPS	Military Entrance Processing Stations. Not acceptable for DoDMERB physicals.
MTF	Military treatment facilities to include medical facilities of the Army, Navy, Air Force, and Coast Guard.
PREVIOUS MEDICAL UPDATE	DD Form 2372 (Statement of Present Health). A signed statement that there has been no change to the applicant's medical status since their initial exam as required by service specific directives. This is required after reactivation of an inactive file that still meets the two-year term of validity of the physical examination.
QUALIFIED	Indicates an applicant's final status as physically and medically qualified for commissioning or entry into military service.
RECERTIFICATION	Required action once the original DoDMERB certification expires, or the applicant is transferring from one program to another. Certifications are valid for one year or one cycle.
REMEDIAL	DoDMERB requires additional information or evaluations from the applicant before a determination of final medical status.
SCHOOL ID CODE	The detachment number. NOTE: <u>Failure to place ID Code in the upper right hand corner of the DD Form 2351 could will result in a processing delay.</u> Please provide to DoDMERB the detachment number on 2- and 3-year applicants upon arrival at school.
SHIP DATE	Date the physical exam prints out of the DoDMERB optical system to coincide with the certification date.
SUB-CONTRACT EXAMINER	Physician, dentist, or optometrist contracted by the Contractor to complete specified portions of the initial DoDMERB physical examination.

TERM OF VALIDITY	The length of time the DoDMERB physical examination is valid. Initial examinations are valid for two years from the date of examination.
WAIVER	A waiver allows applicants to enter programs even though there may be a disqualifying condition. Waiver considerations vary with each ROTC program.

POINTS OF CONTACT/INFORMATION

(E-mail is the preferred method of communication)

DoDMERB ADDRESS

Department of Defense Medical Examination Review Board
8034 Edgerton Drive, Suite 132
USAF Academy, CO 80840-2200

DoDMERB TELEPHONE NUMBERS

Fax Number: (719) 333-3569

Voice Confirmation Number: (719) 333-7884 (to confirm fax is received)

**Monday – Friday:
Between 0700 – 1100
and 1400-1530 (Mountain
Time)**

NOTE: Faxes should **ONLY** be sent when specifically requested by DoDMERB staff and should be limited to five pages or less. Routine submission of remedials or related correspondence should be sent via regular or overnight mail to ensure clarity of correspondence that must be optically scanned. Faxing will only save mail time. Data will be processed in order received.

Note to Detachment: Please discourage 2- & 3-year applicants from calling DoDMERB directly.

Army

Four-year ROTC applicants and parents:

Commercial: (719) 333-3562; DSN: 333-3562

- E-mail: Army.dodmerb@usafa.af.mil (**medical questions**)

Detachments (for 2- & 3-year CSP applicants – not advance designees): Commercial: (719) 333-3579; DSN: 333-3579

- E-mail: MurraySK.dodmerb@usafa.af.mil (**status checks only**)
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Navy

All Detachments: Contact your service specific HQ for all 4-year ROTC status checks, as well as advance designees

Four-year ROTC applicants and parents:

Commercial: (719) 333-3562; DSN: 333-3562

- E-mail: Navy.dodmerb@usafa.af.mil (**medical questions**)

Detachments (for 2- & 3-year CSP applicants – not advance designees): Commercial: (719) 333-4428; DSN: 333-4428

- E-mail: MurraySK.dodmerb@usafa.af.mil (**status checks only**)
-

Air Force

Four-year ROTC applicants and parents:

Commercial: (719) 333- 3562; DSN: 333-3562

- E-mail: AirForce.dodmerb@usafa.af.mil (**medical questions**)

Detachments (for 2- & 3-year CSP applicants – not advance designees): Commercial: (719) 333-3576; DSN: 333-3576

- E-mail: MurraySK.dodmerb@usafa.af.mil (**status checks only**)
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**CONTRACTOR
(Currently Concorde,
Inc.)**

- Phone numbers: (215) 587-9600 / Option 2 (**0830-1700 EST**)
- Fax numbers: (215) 587-9240
(215)563-7219

SCHEDULING MEDICAL EXAMINATIONS

All four-year applicants, to include all Major Junior College (MJC) applicants, will be scheduled for physical examinations by DoDMERB through Medical Treatment Facilities (MTF's) or the current civilian medical facility contractor.

ARMY PRESCREENING PROCEDURE

Before scheduling an applicant for a physical examination, the applicant should be prescreened by the detachment IAW **Cadet Command Pamphlet 145-4**. Applicants should not be scheduled for a physical exam if they are unable to pass a height/weight or body fat test.

MILITARY TREATMENT FACILITY (MTF)

Two- and three-year scholarship applicants must be scheduled by their ROTC detachment.

When a detachment determines the need for a scholarship medical examination, it should contact their supporting MTF.

Allow **two to six weeks** from the time the appointment is made until the completion of the physical examination. The MTF will forward the completed exam to DoDMERB.

MTF operational commitments and mission take priority over ROTC/CSP physical examinations.

MEPS

DoDMERB does not accept ROTC/CSP physical exams conducted at MEPS facilities. DoDMERB exams are more extensive. MEPS exams (SF88 & SF93) require many follow-up evaluations. **NOTE:** DoDMERB will not accept SF 88's or SF 93's!

CONTRACTOR

Two- and three-year on-campus applicants will be scheduled by their detachments through the Contractor when an MTF is not available.

Before a detachment requests the Contractor to perform a physical, it must establish from the applicant whether he/she has completed a DoDMERB physical within the past one to two years. If the applicant is uncertain, the detachment should contact DoDMERB. The applicant's social security number is needed to initiate the search.

If the applicant has a previous valid DoDMERB exam, the detachment will use that physical exam. (NOTE: An exam is valid for two years from the date of the medical examination.) Please refer to "Previous Medical Examination" section for the correct procedures to follow.

SCHEDULING PHYSICAL EXAMS (CONT'D)

CONTRACTOR

If an applicant has no previous DoDMERB examination, the detachment schedules an exam through the Contractor using the following guidelines.

- Detachments will prepare a letter stating their specific physical examination requirements. The letter will be forwarded to the Contractor only, not to DoDMERB.
- The Contractor will assign the applicant to a specific exam center. Additionally, the Contractor will forward to the detachment a scheduling packet to include blank examination forms, directions to the examining center, and an appointment notification card. This appointment packet will only be used by the cadet/midshipman for whom it is intended. The detachment cannot make “substitutions” of packets in order to expedite or schedule medical examinations.
- Upon receipt of the packet, the detachment will schedule the examination at the center authorized by the Contractor.
- Immediately following the scheduling of the initial physical exam appointment, the detachment returns the notification card to the Contractor.

Civilian contract companies will not provide the results of examinations or copies to individual detachments.

The detachment is responsible for rescheduling any exam or a portion thereof.

- If rescheduling of the exam is necessary, the detachment immediately contacts the supporting exam center. If the new exam date is more than five (5) working days after the original exam date, the detachment notifies the Contractor and provides them with the examination date.
- Failure of an applicant to appear for a scheduled appointment will result in a cost charge to the government. After two failures to appear, the Contractor **cannot** authorize any additional examinations to be scheduled and the detachment will be instructed to contact DoDMERB.
- Upon completion of all three parts of the physical exam, the examining facility forwards the exam to the Contractor, who, in turn, forwards the exam to DoDMERB.

It is important to remember that communications between detachments and civilian contract companies should be limited to appointment scheduling and scheduling-related questions.

PREVIOUS MEDICAL EXAMINATIONS

PREVIOUS EXAMS

DoDMERB maintains physical exams on file for a period of five years. Detachments must determine if an applicant has had a previous DoDMERB exam that has been forwarded to DoDMERB for review. Determination is made by asking the applicant, or by contacting DoDMERB.

- If the applicant has had a physical exam, it is valid for two years from the date of the medical exam.
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PREVIOUS EXAM REVIEW REQUEST

Detachments may request a current review of the previous physical exam by forwarding a memorandum of request. The following information must be included in the request:

- Detachment name (Name of college/university)
 - Detachment number (school office, school code number)
 - Applicant's name (bold letters)
 - Applicant's social security number (bold numbers)
 - Detachment point of contact person(s)
 - Detachment's telephone number
-

DD FORM 2372 (DoDMERB STATEMENT OF PRESENT HEALTH)

A Statement of Present Health should accompany the above request to save processing time. (DD Form 2372 is required if the previous physical exam is more than one year old.)

- Any changes to the applicant's medical history (surgeries, fractures, newly diagnosed medical conditions, medications, dental work, etc.) since his/her last physical exam must be reported to DoDMERB.
- The applicant completes the DD Form 2372 with his/her printed name, date, social security number and signature.

Upon receipt of the previous exam request and DD Form 2372, DoDMERB reviews the examination for the specific program for which the applicant is applying.

This review accomplishes two things:

- To eliminate a complete new exam for the applicant and,
 - To save time and money for the government, the applicant and the detachment.
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PREVIOUS MEDICAL EXAMINATIONS (CONT'D)

PREVIOUSLY CERTIFIED EXAMS

If the detachment requests a previously certified physical exam (**for two- and three-year scholarship applicants**) due to loss, school transfer, etc., a **request should be submitted, in writing**, (to include detachment address, applicant's name and social security number), explaining the reason for the request. **DoDMERB will not respond to telephonic requests for physicals.** The request should be addressed to the attention of the College Scholarship Program Secretary.

If the applicant requests a copy of previous physical exam for his/her own personal use, training, or for inclusion in other school packages, the applicant must send a written request (to include his/her name, social security number and the reason for the request) to the attention of Cathy Puhl, Medical Records Section, DoDMERB. It is **not certified** by DoDMERB for scholarships and is stamped as such.

FOUR-YEAR SCHOLARSHIP EXAMS

Copies of all **four-year scholarship exams, including advance designees** must be requested from:

Army: US Army Cadet Command
ATCC C2
Fort Monroe, VA 23651-5000
Telephone: (757) 727-4566/4567/4568

Air Force: HQ AFROTC/RRUC
Building 500
Maxwell AFB, AL 36112-6663
Telephone: (334) 953-2820

Navy: Chief, Naval Education and Training
NAS Pensacola, FL 32508-5100
Telephone: (850) 452-4968 ext. 322

ADVANCE DESIGNEES (PHYSICALS AND REMEDIALS)

ADVANCE DESIGNEES Advance designees are four-year Air Force, Navy, Army, and Marine Corps Option Scholarship applicants who were not awarded full four-year scholarships but have been offered a three and a half or three-year scholarship.

Advance designees are processed by DoDMERB through the end of the calendar year.

Detachments are strongly recommended to identify its advance designees at the beginning of a school year, and encourage them to complete their medical exams prior to 31 December to avoid additional delays in processing their exams. After 20 January the following year, the detachment may request, in writing, that an applicant be added to the 2/3 year CSP.

All four- and three-year advanced designee medical exams are automatically forwarded to their respective headquarters when the applicants are medically qualified/waivered, and have accepted a scholarship.

- Detachments will request copies of the medical exams from their respective headquarters.

NOTE FOR DETACHMENTS: If the applicant has not been identified for your program, all letters requesting remedial information for the advance designees will be sent to the designee's home address.

- If the applicant is already at the school and remedials are still pending, DoDMERB requires the correct address of the applicant.
 - The detachment will notify DoDMERB immediately of the applicant's change of address.
-

SUBMITTING PROCEDURES FOR MEDICAL EXAMINATIONS

MEDICAL EXAMS PERFORMED AT MTF'S OR CONTRACT FACILITIES

All initial medical exams on scholarship applicants must be performed using DD Forms 2351, 2480 and 2492, and will be forwarded by the examining facility to DoDMERB for review. DoDMERB will not accept exams performed on SF 88 or SF 93 for the CSP program.

- The Contractor will review all parts of the medical exams for completeness prior to sending to DoDMERB.
- MTF's will review for completeness all medical exams performed at their facilities before forwarding to DoDMERB.

DETACHMENT ADDRESS

Detachments will ensure the detachment address, to include the detachment number, is in Block 8 of DD Form 2351 (Report of Medical Examination) to ensure results of the exam are reported to the appropriate ROTC unit. Also, place the detachment number in the **top right hand corner** of the page, above the border.

SUPPLEMENTAL REVIEW (REMEDIALS)

REMEDIALS

There are three types of remedial information requested by DoDMERB:

- Clarification of information provided by the applicant.
- Copies of medical records pertaining to injury or illness.
- A current medical evaluation/test by a physician or specialty.

Applicants have two options when obtaining a medical evaluation:

- Make arrangements with a physical examination office at a military treatment facility using the remedial letter sent by DoDMERB. The applicant must be in possession of the remedial letter when reporting for the examination. (NOTE: MTF's will perform the evaluation/test(s) only if they have the ability and the staff available.)
- Or, the applicant may obtain the evaluation or test(s) through civilian medical facilities ***at their own expense***. This includes all follow-up tests at the current civilian medical facility. (The care obtained at the contracted facilities is considered a "civilian medical facility", **after** the initial physical examination is accomplished.) This means that any additional evaluations will be the financial responsibility of the applicant.

Once all remedial action has been resolved, submit the remedial to DoDMERB with an appropriate cover letter containing the following information:

- Applicant name and social security number (please ensure social security number is on **all** pages.)
- Detachment address and number
- Detachment's point of contact and telephone number.

Note: If the applicant is a military dependent make sure the applicant's social security number is used - not the sponsors.

MEDICAL EXAMINATION FINAL DISPOSITION

FINAL DISPOSITION

Once an applicant is physically qualified, DoDMERB indicates such on the medical examination and forwards a copy of the exam to the detachment. Air Force detachments receive only the applicant's DD Form 2351.

The date a medical exam is certified to be qualified is a non-negotiable date generated by DoDMERB's computer system.

- **NOTE:** Prior planning is necessary to ensure medical exams are certified and received by the detachments prior to the contracting dates. We do not process physicals for camp. Non-DoDMERB physicals, physicals required for camp, and other peripheral issues do not constitute a rush on DoDMERB processing. Our priority is the processing of Service Academy and ROTC Scholarship physicals.
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MONTHLY STATUS REPORT

MONTHLY STATUS REPORT

Monthly status reports track the medical status of a detachment's applicants that are in the current cycle. At the beginning of each month, the report is sent by DoDMERB to the respective detachments.

NOTE: Army regions receive weekly status reports.

Remedial codes listed next to each applicant are for the detachment's information purposes. Each remedial code has been explained in the remedial letter forwarded to a detachment on respective applicants, as well as in Attachment 1 of this guide.

- We recommend detachments retain copies of applicants' remedial letters to keep abreast of each applicant's status.

Disqualification codes indicate an applicant is medically disqualified.

MEDICAL STATUS INQUIRIES

INQUIRIES

On occasion when an applicant's medical status is necessary, the applicant's social security number is required to retrieve information.

DoDMERB will telephonically provide status for up to two applicants. If a medical status is needed for more than two applicants, please fax, mail or e-mail the list to DoDMERB, and we will respond in the order received. If you have sent DoDMERB remedial information on an applicant, please allow at least 16 calendar days before requesting a status check.

- **NOTE: Please refer to monthly status reports and coordinate with region headquarters before contacting DoDMERB. DoDMERB has only one CSP secretary and there are over 500 ROTC detachments nationally.**

For 1-2 Applicant Inquiries

For more than 2 Applicant Inquiries

FAX

MAIL

E-MAIL

WAIVERS

AIR FORCE

Two- and Three-Year College Scholarship Program (CSP)

- When an applicant is disqualified, DoDMERB forwards a copy of his/her complete medical examination to the appropriate detachment.
- The detachment may then forward a copy of the disqualified applicant's exam to AETC/SGPS for waiver consideration.
 - HQ AETC/SGPS
63 Main Circle, Suite 3
Randolph AFB, TX 78150-4519
- All rebuttals are forwarded with the applicant's medical examination to AETC. **Do not send rebuttals to DoDMERB.**

Four-Year and Advance Designee Programs

- DoDMERB, using guidance from HQ AETC/SGPS, reviews all medically disqualified applicants for four-year and advance designee programs for conditions that are potentially waiverable. DoDMERB automatically forwards these applicants medical exams to HQ AETC for a waiver determination.
 - For granted and/or denied waivers, HQ AETC/SGPS returns the determination to DoDMERB, who, in turn, forwards the determination and the medical examination to AFROTC. AFROTC notifies the detachment of the waiver determination.
-

WAIVERS (CONT'D)

NAVY

Two- and Three-Year College Scholarship Program (CSP)

- When an applicant is disqualified, DoDMERB forwards a copy of his/her complete medical examination to the appropriate detachment.
- If the detachment decides to pursue a waiver for the applicant, they forward a copy of the disqualified applicant's exam to the Bureau of Medicine and Surgery (BUMED CODE 025) for waiver consideration.
 - Bureau of Medicine & Surgery (CODE 025)
23rd and E Street
Washington, D.C. 20372
- All rebuttals are forwarded with the applicant's medical examination to BUMED. **Do not send rebuttals to DoDMERB.**

Four-Year Programs

- A disqualified applicant forwards a waiver request letter to DoDMERB. If further information or testing is required to support a waiver request, DoDMERB then informs the applicant.
 - Upon completion, the applicant's file is forwarded to BUMED for a waiver determination.
-

WAIVERS (CONT'D)

ARMY

Two- and Three-Year College Scholarship Program (CSP)

- Two- and three-year scholarship physicals for applicants who are determined medically disqualified will no longer automatically be forwarded to Cadet Command for waiver consideration.
- DoDMERB will forward all disqualified 2- and 3-year scholarship physicals to their respective detachments. The responsible Professor of Military Science (PMS) will then initiate the request for medical waiver, if deemed appropriate, using Cadet Command Form 131-R (Cadet Action Request) **and forward directly to Cadet Command for review by the Command Surgeon.**
- The initial request must include all appropriate medical information affecting the waiver consideration, to include the DoDMERB physical. Requests for reconsideration should not be submitted unless they include new or additional medical documentation to support a waiver. Waivers will not be considered on any physical marked "NONWAIVERABLE" by DoDMERB and will be returned without action.
- Cadet Command will inform the PMS and DoDMERB when a waiver is approved. If any remedials exist, DoDMERB will coordinate with the PMS to resolve them. Once the remedials have been cleared, DoDMERB will forward a stamped copy of the DD 2351 to the PMS with status of waiver annotated.
- Both DoDMERB and Cadet Command can better serve the battalions and accomplish their mission if phone calls for "status checks" are kept to a minimum. Questions regarding medical waivers should be forwarded to Cadet Command.

Four-Year Programs

- A disqualified applicant must request waiver consideration through Cadet Command as they are not assigned to a detachment.
 - Upon the request from Cadet Command, DoDMERB will forward the disqualified physical examination to Cadet Command for waiver consideration.
 - The applicant will be notified by DoDMERB, via mail, of the review results.
-

PROCESSING TIME FRAMES

CIVILIAN EXAMINATION CONTRACTOR

The Contractor is required to forward all completed reports to DoDMERB within 20 calendar days from the date of the medical examination.

- There may be times when the Contractor requests additional information from the applicant in order to meet contract obligations. The Contractor will hold the examination until the applicant provides the requested information.
-

MTF

MTF's are required to forward completed medical examinations to DoDMERB within ten (10) duty days.

DoDMERB

DoDMERB has three separate processing actions, each having different levels of review resulting in differing time frames.

Initial medical examination

- Review process requires seven to fourteen duty days from the receipt of the exam for medical status determination, but may take as long as thirty duty days during peak periods.

Remedial

- Review process requires three to five duty days from **receipt of the remedial information** to medical status determination, but may take as long as seven to ten duty days during peak periods.

Certification date or shipping of the file

- When an applicant is physically qualified, his/her medical examination is printed by DoDMERB's computer system. Each agency (Navy ROTC, Army ROTC, etc.) prints on a designated day each week. This print date is the "Certification Date". The mail date is different and is in the order received and as time allows.

DODMERB MEDICAL EXAMINATION FORMS

DoDMERB MEDICAL EXAMINATION FORMS

Current medical examination forms may be accessed at the following website and used for the detachment's needs:

<http://web1.whs.osd.mil/icdhome/DDEForms.htm>

- **DD Form 2351** (Report of Medical Examination), **JUL 97**
 - **DD Form 2492** (Report of Medical History), **JUL 97**
 - **DD Form 2480** (Report of Dental Examination), **JUL 97**
-

Attachment 1

REMEDIAL CODES

002	Farnsworth lantern test	060	Removal of impacted teeth, #32
003	Routine color vision test	061	Additional information - hay fever & all other respiratory
004	Vivid red-Vivid green test	062	Additional information - broken bones
005	Weight check 90-day follow up	063	Additional information - motion sickness
006	Liver function studies	064	Additional information - sleepwalking
007	Hemoglobin and hematocrit blood test	065	Additional information - bedwetting
008	Repeat hemoglobin and hematocrit blood test	066	Previous year medical update
009	Three-day blood pressure series	067	Valsalva
010	Internal medicine evaluation - heart murmur	068	Internal med evaluation for Proteinuria Postural
011	Albuminuria evaluation	069	Electrocardiogram
012	Internal medicine evaluation - abnormal EKG	070	Removal of impacted teeth, #17
013	Internal medicine evaluation - other	071	Reading aloud test
014	Cardiology evaluation	072	Medical statement for diabetes & insect bites
015	Neurology evaluation - head injury with unconsciousness	074	Sitting height
016	Neurology evaluation - other	075	Eye exam - depth perception
017	Cardiology evaluation - abnormal EKG	076	Additional information - other
018	ENT evaluation - other	077	Physician evaluation
019	Photographs for scoliosis and obesity evaluation	078	History of contact with tuberculosis
020	Ophthalmology evaluation - orthokeratology	079	Repeat Farnsworth lantern color vision test
021	Repeat audiogram	080	Repeat urine microscopic exam
022	Repeat evaluation must be performed at an MTF	081	Acne photographs
023	Dermatology evaluation	082	Results of Pap smear - need pelvic examination results
024	Surgical evaluation - hernia	083	Pulses
025	Surgical evaluation - other	084	Wolff-Parkison-White pattern
026	Allergy evaluation - skin test/nasal smear medical records	085	EKG - heartbeat greater than 80 bpm
027	Psychiatric evaluation - other	086	Repeat ear exam after wax removal
028	Speech evaluation - failure of reading aloud test	087	Please (indicate verbage individually)
029	Request for treatment records from birth	088	Incomplete SF 88 or DD form 2351
030	Dental caries	090	Eye evaluation - failure of depth perception
031	Endodontic treatment	091	Repeat EKG (Technically unsatisfactory)
032	Periodontitis	092	Eye evaluation - history of eye surgery
033	Oral surgery evaluation	093	Incomplete DD Form 2492
034	Provide current bitewing and panoramic x-rays	094	Orthopaedic evaluation - Pes Planus
035	Non-restorable teeth	095	Bunions, current
036	Missing teeth	096	Eye exam - near point of convergence
037	Removal of impacted teeth, #17 and #32	097	Family history - diabetes
038	Dental casts required	099	Evaluation or consultation after healing is complete
039	Report on orthodontic treatments	100	Date of last menstrual cycle
040	Baseline PFT	101	Pap test
041	Urology evaluation - other	102	Internal medical evaluation - abnormal hematocrit
042	Unexplained use of medication	103	Prompt response requested
043	Horizontal and vertical phorias required	106	Split 24-hour urinalysis
044	Tropia evaluation	108	Photographs for scoliosis
045	Ophthalmology evaluation	109	Evaluation for weight exceeding standards
046	Orthopaedic evaluation - history of knee surgery	110	Complete evaluation not earlier than:
047	Additional information regarding alcohol/drug use	111	Dermatologist evaluation
048	Orthopaedic evaluation - recurrent back pain	112	Acne evaluation
049	Orthopaedic evaluation - shoulder separation	113	Hay fever and asthma evaluation
050	Orthopaedic evaluation - other	114	Insect bite / bee sting evaluation
051	Underweight	115	Major scar tissue / skin graft
052	Overweight	116	Additional data for waiver – process will cont. w/receipt of data
053	Recheck of height and weight	117	Cycloplegic - less than 10 correct on eye exam
054	Repeat routine urinalysis	118	Additional data for waiver consideration
055	3-hour glucose tolerance test	119	Test for human T-cell lympho type III (HIV)
056	Gynecomastia evaluation	120	Evaluation of acne 30 days after discontinuing medication
058	Current x-ray report - wrist	121	X-ray report of chest
059	Current x-ray report - other		

123 ROTC notification of physical expiration

124 Pulmonary evaluation at a military facility

REMEDIAL CODES (cont.)

126	AF weight adjustment procedure - women	161	Current eval by urologist regarding WBC/RBC in urine
127	Repeat 3-day B/P series with oversize cuff	162	Fasting blood sugar
128	Request for treatment/hospital records	163	Length of time contact lenses out
129	Medical evaluation - abnormal EKG with ETT	165	ENT evaluation - deviated nasal septum
130	Records leading to desensitization therapy	166	Military adaptability evaluation
131	Urology consultation, hydrocele or varicocele	167	Evaluation for abnormal GTT
132	Type III dental examination	169	Provide 3-5 minute tape cassette of your voice
133	Provide uncorrected and corrected vision	170	Evaluation for history of convulsive disorders
134	Orthopaedic evaluation - Osgood-Schlatter's disease	172	Color vision test inaccurately recorded
135	Missing SF 93 or DD Form 2492	173	Statement of health and medication
136	Obtain an eye exam limited to a Cover Test	174	Pulse readings for three days
137	Scoliosis films measured using the Cobb method	175	Obesity evaluation
138	Gynecology evaluation	176	Cycloplegic refraction
139	Photos of both hands on flat surface, fingers	177	Knee injury/surgery treatment records
140	Photographs	178	Incomplete blood alcohol and urine drug screen
141	Have a panoramic x-ray taken	179	Incomplete blood alcohol
142	Have bitewing x-rays taken and forward to DoDMERB	180	Incomplete urine drug screen
143	Audiogram air and bone conduction and SRT	181	Provide the results of a current electrocardiogram
144	Sitting blood pressure	182	Incomplete physical / missing information
145	Additional info-change in menstrual pattern/treatment	183	ENT evaluation due to ear surgery & surgical report
146	Missing DoDMERB Form 2480	185	Please provide body fat estimation
147	Eye exam to rule out diplopia and suppression	186	Please provide body fat estimation (females)
148	Appt offers - med-qual - with subsequent injury	187	Ophthalmology evaluation for excessive refractive error
149	Close-up full face photo: with and without glasses	189	Include pathology reports
150	Internal medicine evaluation - tachycardia	190	AFR det cmdr clearance of cadet/appl with
151	Please forward current x-rays of	194	Overweight DQ clear remedials & resubmit CSP
152	Info regarding head injury noted on medical history	195	Arrhythmia evaluation due to ECG findings
153	Obtain an eye exam limited to field of vision	200	Applicant DQ - prog mgr req addition info on DQ or rem
154	Exercise PFT for asthma	201	Results must be received NLT:
155	Athletic participation history	225	Pending review by consultant
156	AFROTC orthodontic treatment plan	500	Dr sign/pending information/poor quality remedial
157	Pulm function testing req - methacholine/histamine test		
159	Statement of history re headaches-DD Form 2378		

Attachment 2

DISQUALIFICATION CODES

001	Refractive error greater than -1.00 diopters	059	Abnormal pulmonary test improved with bronchodilator
002	Refractive error greater than -2.25 diopters	060	Refractive error greater than ± 6.00 diopters
003	Refractive error in excess of flying standards	061	History of vertebral fracture within past year
004	Refract error $> +2.00$ diopters in any meridian	062	Spondylolisthesis
005	Refractive error greater than +3.00 diopters	063	Severe acne
006	Refractive error greater than +5.50 diopters	064	History of atopic dermatitis
007	Astigmatism greater than 0.75 diopters	065	History of psoriasis
008	Astigmatism exceeding the acceptable standard	066	Standing height in excess of 77 inches
009	Astigmatism greater than 3.00 diopters	067	Misc DQ - dental
010	Anisometropia greater than 3.50 diopters	068	Standing height less than 66 inches
011	Distant visual acuity exceeding 20/20	069	Standing height less than 64 inches
012	Anisometropia greater than 2.00 diopters	070	Excessive sitting height
013	Unaided distant visual acuity worse than 20/50	071	Dental malocclusion
014	Anisometropia greater than 2.50 diopters	072	Orthodontic appliances in place
015	Near visual acuity worse than 20/20	073	Heart murmur of possible organic origin
016	Refractive error less than plano in any meridian	074	Overweight
017	Esophoria greater than 10 diopters	075	Allergies requiring current hypersensitization
018	Hx of anterior or posterior cruciate ligament repair	076	Motion sickness
019	Exophoria greater than 6 diopters	077	Varicocele or hydrocele which may be surgically corrected
020	Refractive error $> \pm 7.00$ diopters in any meridian	078	Hernia which may be surgically corrected
021	Absence of one kidney	079	Standing height in excess of 78 inches
022	Hyperphoria greater than 1.5 diopters	080	Standing height less than 62 inches
023	Kidney stone	081	Insufficient number of teeth
024	Heterotropias or strabismus exceeding standard	082	Body fat exceeding the acceptable standard
025	Hypothyroidism requiring maintenance medication	083	Chronic dislocation or subluxation of shoulder
026	Acne requiring oral medication for control	084	History of fracture with residual defects
027	Substandard depth perception	085	Knee derangement or instability
028	Substandard color vision	086	Abnormal electroencephalogram
029	Failure of red lens test	087	History of seizure disorder
030	Substandard auditory acuity	088	Distant visual acuity not correctable to 20/20 in each eye
031	Deviated nasal septum	089	Misc DQ - ears and hearing
032	Hx of chronic allergic rhinitis after 12 th birthday	090	Underweight
033	History of asthma	091	Refractive error greater than -8.00 diopters
034	Asthma and/or symptoms consistent with asthma	092	Orthopaedic conditions DQ for Airborne/Ranger
035	Misc. DQ - Abdomen & gastrointestinal system	093	Misc DQ - endocrine and metabolic disorders
036	Inability to perform Valsalva maneuver	094	Cleft lip or palate with residual deformity
037	History of traumatic pneumothorax	095	Misc DQ - extremities
038	History of chorioretinitis	096	Diplopia
039	Asthma or Asthma symptoms requiring medication	097	Nystagmus
040	History of spontaneous pneumothorax	098	Misc DQ - eyes and vision
041	Unspecified respiratory cond relieved w/bronchodilator	099	Misc DQ - genitourinary system
042	Ventricular septal defect, congenital	100	Sitting height less than 34 inches but more than 33 inches
043	Blood pressure elevated above acceptable standard	101	History of kidney disease
044	Hypertension	102	Defect of extremities
045	Abnormal electrocardiogram	103	Refractive error > -6.75 diopters(spherical equivalent)
046	Complete right bundle branch block	104	Waiver granted by Academy
047	Wolff-Parkinson-White Syndrome	105	Near visual acuity worse than 20/40
048	Heterphoria exceeding standard for non-rated ops	106	Aphakia
049	History of radial keratotomy or other eye surgery	107	History of vascular and/or tension headaches
050	History of peptic ulcer	108	Hx of vertebral fracture involving more than one vertebra
051	Albuminuria	109	History of colitis
052	History of skull fracture	110	Cataract
053	History of head injury with residual abnormal EEG	111	History of gastrointestinal resection
054	History of migraine headaches	112	Perforation of tympanic membrane
055	Lack of adaptability for Officer Training Program	113	Misc DQ - heart and vascular system
056	Speech defect	114	Misc DQ - height, weight and body build
057	Misc DQ - Blood & Blood-forming tissue disease	115	Nasal polyps or history of surgery for polyps
058	Sleepwalking past age 12	116	Misc DQ - lungs and chest wall

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| 117 | Pes Planus of severe nature | 122 | Pilonidal cyst and/or cystectomy within the past year |
| 118 | History of unconsciousness in excess of 24 hours | 123 | Distant visual acuity not corrected to 20/20 in better eye |
| 119 | Misc DQ - mouth, nose, pharynx, trachea, esophagus, larynx | 124 | Misc DQ - skin and cellular tissues |
| 120 | Misc DQ - neurological disorders | 126 | Osgood-Schlatter's disease - symptomatic |
| 121 | Misc DQ - psychoses, psychoneuroses and personality disorders | 127 | History of diabetes in both parents |

DISQUALIFICATION CODES (cont.)

128	Undescended testicle which may be surgically corrected	229	Ptosis
129	Misc DQ - spine, scapulae, ribs and sacroiliac joints	230	Refractive error greater than +8.00 diopters
130	History of pericarditis	231	Eye abnormality - other
131	History of heart surgery	234	Sleepwalking past age 12
132	Chronic skin disease	235	Enuresis past age 12
133	Loss of bony substance of skull	238	Scoliosis
134	Misc DQ - systemic diseases and misc conditions	241	Reviewed for Navigator Training only - CSP
135	Blood alcohol confirmed positive above 0.05	242	Reviewed for Missile Duty only - CSP
136	Urine drug screen confirmed as cocaine positive	243	Reviewed for Non-Flying Category only
137	Urine drug screen confirmed as THC-positive	244	Flying determination made at end of sophomore ear
138	Severe chronic periodontal disease	246	History of spinal fusion
139	Refusal to undergo drug/alcohol testing	247	Waiver denied by Naval Academy
140	History of herniated nucleus pulposus	248	Waiver denied by waiver authority
141	History of allergic reaction to insect stings/bites	249	Waiver granted by reviewing authority
142	History of allergy to common foods	250	Waiver granted by USAF Surgeon
143	Misc DQ - tumors and malignant diseases	251	Waiver granted by CNET or HQMC through CNET
144	History of gastrointestinal hemorrhage	252	Non-Union of fracture
145	Near visual acuity exceeds standard (non-rated ops)	260	Pulse elevated above acceptable standards
146	Misc DQ - venereal disease	261	Substandard color vision - nursing applicants
147	Chronic dermatitis	262	Unaided near visual acuity not correctable to 20/20
148	Retained orthopaedic fixation device	265	Standing height exceeds military standards
149	History of suicidal gesture	266	Standing height substandard for Flying Class III
151	History of hematuria of unknown etiology	267	Standing height less than 60 inches, confirmed
153	Misc DQ - head and neck	268	Standing height less than 66 inches, confirmed
154	History of detached retina	269	Standing height in excess of 80 inches
155	Near visual acuity not correctable to acceptable standard	300	Age does not meet standards
156	Distant visual acuity not correctable to acceptable standards	301	Corrected visual acuity exceeds standards
157	Chondromalacia of patella	302	Astigmatism greater than ± 2.00 diopters
158	Cardiac arrhythmia	303	Physician's evaluation - Age not acceptable
159	History of Malignancy	304	Physician's evaluation - Medical exam take date does not meet standards
161	Refractive error greater than ± 8.00 diopters	305	Physician's evaluation - Hemoglobin/hematocrit value not acceptable
163	Substandard near point of convergence	306	Physician's evaluation - Reading aloud test failed
167	Glycosuria	307	Physician's evaluation - EKG read not acceptable
170	History of febrile seizure prior to age 5	308	Physician's evaluation - Pulse not acceptable
172	Diabetes mellitus	309	Physician's evaluation - Urine level sugar not acceptable
173	Qualified Scholarship Standards	310	Physician's evaluation - Urine level protein not acceptable.
174	Qualified Appointment / Scholarship, Chapter 2	311	Physician's evaluation - Urine level microscopic exam not acceptable
175	Qualified Airborne / Ranger Training	312	Physician's evaluation - Standing height not acceptable
176	Qualified Combat Arms	313	Physician's evaluation - Blood pressure not acceptable
179	Standing height less than 60 inches	314	Physician's evaluation - Body fat exceeding standards
180	Chronic urticaria	315	Physician's evaluation - Hearing not acceptable
182	Dysmenorrhea	316	Physician's evaluation - Visual phoria not acceptable
183	Acne requiring treatment with Accutane	317	Physician's evaluation - Red lens not acceptable
185	Reactive airway disease requiring bronchodilators	318	Physician's evaluation - Visual refractive error not accept.
186	History of middle ear surgery	319	Physician's evaluation - Visual Cylindrical not acceptable
191	Anemia	320	Physician's evaluation - Anisometropia not acceptable
192	Residuals of club foot	321	Physician's evaluation - Near point convergence not acceptable
197	Mitral valve prolapse	322	Physician's evaluation - Near visual acuity not acceptable
200	Misc DQ - Program specified	323	Physician's evaluation - Distant visual acuity not accept.
201	Standing height less than 58 inches (female)	324	Physician's evaluation - Color vision not acceptable
206	Hematocrit or hemoglobin below standards	325	Physician's evaluation - Sitting height not acceptable
211	History of paroxysmal tachycardia	326	Physician's evaluation - Depth perception not acceptable.
216	Unaided distant visual acuity worse than 20/400		
217	Unaided distant visual acuity worse than 20/200		
218	Secondary amenorrhea of undetermined etiology		
224	Pregnancy		
227	Sitting height less than 33 inches		

